Connecticut Healthcare Associated Infections Advisory Committee Minutes May 4, 2011

Attendees: Ray Andrews, Lauren Backman, Laurie Brentlinger, Karen Buckley-Bates, Dale Cunningham, Louise-Marie Dembry, Kathryn Cusano, Diane Dumigan, Nancy Dupont, Mary Erdmann, Brenda Grant, Mary Jane Guidfredo, Robin Heard, Alison Hong, Margee Keegan, Diana Kelly, Cynthia Kohan, Cathy Ligi, Alessandra Litro, Meghan Maloney, Trini-Ann Matthew, Harry Mazadoorian, Richard Melchreit, Gayle Nobert, Mary Pakulski, Lynn Pepin, Julie Petrellis, Richard Rodriguez, Jack Ross, Joyce Sauve, Ethel Smith, Beth Sullivan, Karen Taylor, Sylvia Van Heerden, Douglas Waite

Attendees on the phone: Jean Rexford

Call to order: Richard Melchreit called the meeting to order at 9:03 a.m.

Review and approval of prior Advisory Committee meeting minutes (02/23/10): The draft minutes were reviewed and approved.

CLABSI Data Validation and Education Initiatives

Lauren Backman gave a presentation on data collected thus far on the CLABSI validation study. She discussed the need for more time to analyze the data and review it with the hospital infection prevention (IP) staff before public presentation. The Advisory Committee decided that it would be best if Lauren presented the data at a separate meeting (not at a regular quarterly HAIC meeting) as soon as the report is ready. Lauren next spoke about the education initiatives that will be taking place over the next year. A marketing firm is being hired to assist with the education initiatives and develop a new "slogan" for HAI prevention (including hand hygiene) in Connecticut. Infection Prevention week is held in October and that would be an ideal time to launch the new campaign. Lauren also spoke about different education initiatives that are being planned by the Advisory Committee's Education Subcommittee, such as working with higher education nursing programs within the state to offer an infection control course; and a speaker's bureau with a carefully prepared presentation to give to groups such as senior centers, schools, and long term care facilities. The Subcommittee and DPH will be examining possible revisions to the DPH HAI webpage to make it more user friendly.

Infection Control Program Infrastructure

There was discussion about the infection control workforce. Concern was expressed about IPs leaving the workforce due to retirement or other reasons, and the amount of time it takes to hire and train new staff, and the difficulty retaining them. The group agreed that issues like this need to be studied here. Dr. Patricia Stone, a health economist and nurse at Columbia University, published a study on hospital staffing and workforce in California. Her study examined relationships between hospital staffing and patients' risk of health care—associated infection (HAI). Her study found that temporary staff may lack specific training and familiarity with institutional procedures and "best practices" for preventing HAIs, and full time trained staff reduces the risk of HAIs to patients. DPH HAI staff will ask Dr. Stone for permission to access a copy of the survey and to possibly modify it and use it here. Once that data is collected and reported back to the Committee, we will need to determine next steps to address this concern.

Next Steps in Public HAI Reporting in Connecticut

Deferred.

Hospital Specific CLABSI reporting online

The HAI report has been available on the DPH HAI website for a few weeks. The DPH HAI Program has not received many calls about it. There were a couple of articles in the online media that spoke in positive terms about the value of the report and activities being undertaken to communicate about HAIs and to reduce them

Prevention Collaboratives update (CUSP: Stop BSI/CAUTI, MDRO):

CUSP: Stop BSI – CUSP: Stop BSI has been operating for 18 months, is beginning to wind down, and is now in the sustainability phase. A final report session conference call will be done to share what was learned from the project. CUSP: CAUTI project, and is in the enrollment phase. The project will start in September 2011.

There is a third project being discussed and CHA hopes to be asked to enroll by Health Research and Educational Trust (HRET). CHA is still waiting for guidelines.

HAI Program, Stimulus Update and New Application:

DPH is applying for Affordable Care Act (ACA) funding (Health Care Reform). Some funding will be used to fund a HAI staff person that will continue the work of the advisory committee and other HAI duties. Prevention collaboratives can also be funded under this Funding Opportunity Announcement (FOA). DPH will apply for this as well. One or more contractors will be determined through competitive bidding to plan, manage, and document the process and outcomes of HAI prevention collaboratives. Bidders will be permitted to select and bid from a "menu" of possible collaborative types, including pathogen specific (MDROs in general, MRSA, gram negative rods, *C. difficile*), intervention methods (antimicrobial stewardship, hand hygiene), or HAI-type (as described by NHSN, e.g., device associated (e.g., CLABSI, VAP), procedure associated (e.g., SSIs), or other (e.g., influenza vaccination of healthcare workers and patients or outbreak prevention and management). The group recommended that healthcare sectors other than acute care hospitals, such as long term care, dialysis, homecare and hospice, physician offices, dentists etc. be the focus for this initiative, rather than the hospitals as these sectors also need to enhance their infection control practices.

DPH plans to fully expend the federal stimulus (ARA) funds by the end of the year, when the funds expire. ELC ARRA funds will be used for the education initiatives mentioned earlier in the meeting. A contract is being written with the Association for Professionals in Infection Control (APIC) for them to deliver the EPI 101 and 201 courses this fall, which will complete the planned activities of the Advisory Committee's Education Subcommittee (as those will be starting later). The HAI Program is planning the second of three planning conferences, it will be held in June. For EIP all funds will also be expended, as potentially lapsing funds will be used for per diem chart reviewers for the HAI Prevalence and Antimicrobial Use survey.

EIP Studies Status Report:

For the Denominator Simplification Project, six hospitals representing 8 units have been recruited for phase 1 (goal 10 hospitals). Data has been received and entered for 3 hospitals (5 units). We continue to recruit for the additional four hospitals needed to make goal.

Six units from 5 hospitals (goal 10 units) have been recruited for phase 2. Data collected during April at some of the sites should be received this month. Efforts continue to recruit the additional four units needed to reach goal.

For Phase 3 HAI & Antimicrobial Use Prevalence Survey, a total of 11 hospitals have been enrolled in the survey (goal 25). An additional 8 hospitals are currently considering enrollment. Two hospitals have declined to participate. Survey dates have been scheduled at 7 hospitals to date. Three candidates have been identified by Maxim Staffing Solutions to serve as per diem chart reviewers. Three DPH staff participated in a two-day training for EIP Team members in Atlanta April 28-29.

New Advisory Committee Member Packets:

Ethel Smith gave an update in the new orientation packets that will be given to new members. She discussed the different components in the packet and the relevance it has to new members. The group suggested that the new member packet be distributed to all existing members as a helpful reference resource.

Legislative/Government Relations:

A brief update was given on the state budget crisis. As of now the budget has been passed but concessions are needed from state workers. If concessions are not agreed on, lay-offs are possible, but it is unclear which programs might be affected. HAI program staff will keep the Advisory Committee updated.

State HAI planning process, timeline:

Due to the effect of the inclement winter weather on planning, the planning conference has been moved to June 2011. The conference will be held at Wesleyan University in Middletown. The conference will focus mostly on planning, priority setting and resources. The conference will have morning breakout session with the different sectors such as hospitals, long term care, dialysis, ambulatory surgical centers, and homecare and hospice. The afternoon will be broken out into groups of different people from different sectors. The idea is to have perspectives from all sectors at one table to discuss the common goals and priorities. The course will be available on TrainConnecticut for registration, and an email update with registration materials will be sent out to the HAI Advisory Committee by the end of the week.

Adjournment

The meeting was adjourned at 10:59

The next HAIC meeting will be August 3rd at 9:00 am at the Connecticut Hospital Association.